

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### THERAPEUTIC METHODS AND COMPOSITIONS USING VIRUSES OF THE RECOMBINANT PARAMYXOVIRIDAE FAMILY

the specification of which is attached hereto unless the following space is checked:

☒ was filed herewith as a United States Application Serial Number.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s):

<u>Number</u>	<u>Country</u>	<u>Day/Month/Year Filed</u>	<u>Priority Not Claimed</u>
1.			
2.			

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

<u>Application Number</u>	<u>Filing Date</u>
1. 60/155,873	9/24/99
2.	

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

<u>Application Number</u>	<u>Filing Date</u>	<u>Status — patented, pending, abandoned</u>
1.		
2.		

I hereby appoint the following attorneys and agent(s) to prosecute this application and to transact

all business in the Patent and Trademark Office connected therewith:

Kathleen M. Williams,	Reg. No. 34380	Elizabeth N. Spar	Reg. No. 45123
Paula A. Campbell Evans	Reg. No. 32503	Mark FitzGerald	Reg. No. 45,928
Richard B. Smith	Reg. No. 34,020	John Garvey	Reg. No. 37,833
		Dianne Rees	Reg. No. 45,281

as my Attorneys.

Address all telephone calls to Kathleen M. Williams at (617) 573-0451

Address all correspondence to PALMER & DODGE, LLP, One Beacon Street, Boston, MA 02108.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): Stephen James Russell

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: United States of America

Citizenship: UK

Post Office Address: 2701 Salem Road, SW, Rochester, Minnesota 55905 U.S.A.

Full name of second joint inventor, if any (given name, family name): Roberto Cattaneo

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: United States of America

Citizenship: Swiss

Post Office Address: 1023 Hidden Ridge Lane SW, Rochester MN 55902

Full name of third joint inventor, if any (given name, family name): Kah-Whye Peng

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: United States of America

Citizenship: Singapore

Post Office Address: 229 6<sup>th</sup> Avenue SW, Apt.10, Rochester, MN 55902

Full name of fourth joint inventor, if any (given name, family name): Urs Schneider

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: United States of America

Citizenship: Swiss

Post Office Address: 428 6<sup>th</sup> Street SW, Apt. 102, Rochester, MN 55902

Full name of fifth joint inventor, if any (given name, family name): Anthea L. Murphy

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: United States of America

Citizenship: British

Post Office Address: 428 6<sup>th</sup> Street SW, Apt. 3, Rochester, MN 55902

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant or Patentee: Cattaneo, et al.  
Serial No.: Not Yet Assigned  
Filed: September 22, 2000  
Entitled: "THERAPEUTIC METHODS AND COMPOSITIONS USING  
VIRUSES OF THE RECOMBINANT PARAMYXOVIRIDAE  
FAMILY"  
Attorney Docket No.: 180930/1140

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
(37 C.F.R. §§1.9(f) AND 1.27(b)) - NONPROFIT ORGANIZATION

Sir:

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: Mayo Foundation for Medical Education and Research

ADDRESS OF ORGANIZATION:

200 First Street Southwest  
Rochester, Minnesota 55905

TYPE OF ORGANIZATION:

☐ University or other institution of higher education

☐ Tax Exempt Organization under Internal Revenue Service Code (26 U.S.C. §§501(a) and 501(c)(3))

☐ Nonprofit Scientific or Educational Institution under laws of a State of the United States  
NAME OF STATE:

CITATION OF STATE LAW:

☐ Organization that would qualify as a Tax Exempt Organization under Internal Revenue Service Code (26 U.S.C. §§501(a) and 501(c)(3)), if located in the United States

☒ Organization that would qualify as a Nonprofit Scientific or Educational Institution under the laws of a State of the United States, if located in the United States

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. §1.9(e) for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, with regard to the invention described in the patent or application identified above.

**"THERAPEUTIC METHODS AND COMPOSITIONS USING VIRUSES OF THE RECOMBINANT  
PARAMYXOVIRIDAE FAMILY"**

by inventor(s): Cattaneo, et al.

described in

☒ the specification filed herewith

☐ Application Serial No. \_\_\_\_\_, filed \_\_\_\_\_

☐ Patent No. \_\_\_\_\_, issued \_\_\_\_\_

I hereby declare that rights under contract or law have been conveyed to and remain with said nonprofit organization with regard to the invention described in the patent or application identified above.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small entity under 37 C.F.R. §1.9(f) or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

Rick F. Colvin

NAME OF PERSON SIGNING

Mayo Foundation for Medical Education and Research

200 First Street, SW, Rochester, Minnesota 55905

SIGNATURE

9/22/00

DATE